

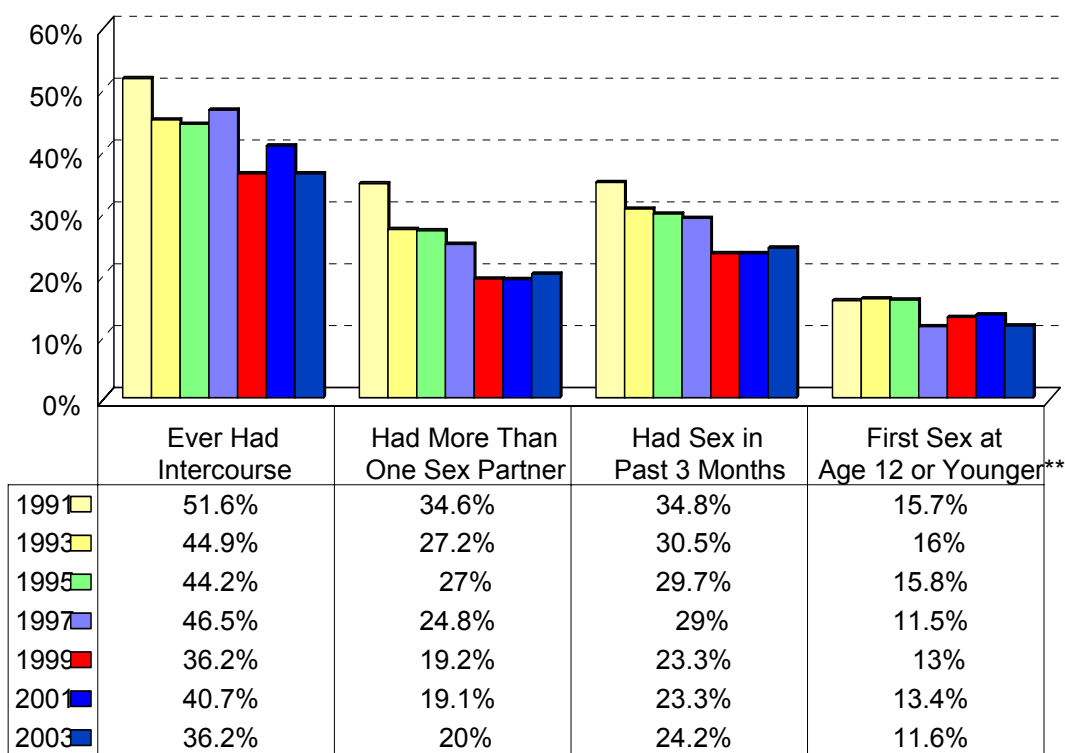
## Sexual Activity

Early sexual activity is associated with unwanted pregnancy, sexually transmitted disease, and negative effects on social and psychological development. The YRBSS questions corresponding to sexual behaviors measure the prevalence of sexual activity, number of sexual partners, age at first intercourse, alcohol and drug use related to sexual activity, AIDS/HIV education in school, condom and other birth control use.

### Highlights

- Reported levels of sexual activity among Lancaster County teens have generally declined from 1991 to 2003, but recent years, 1999-2003, have shown an inconsistent trend (Figure 1). Other general indicators of sexual activity remained stable over the last two biannual survey years.

**Figure 1: Sexual Activity**  
High School Students\*

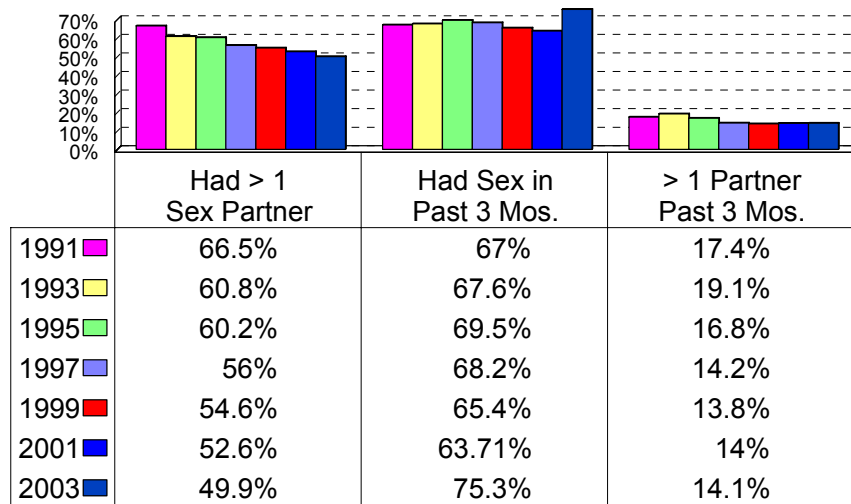


\*\* Students Who Reported Having Had Sex  
Lincoln-Lancaster County Health Department

\* Grade-adjusted

- L The percentage of teens who have had sex that reported that they having had more than one sex partner decreased from 66.5% in 1991 to 49.9% in 2003. However, the percentage of teens reporting to have had sex within the past three months increased from 63.7% in 2001 to 75.3% in 2003.

**Figure 2: Sexual Activity\***  
High School Students Who Reported Having Had Sex

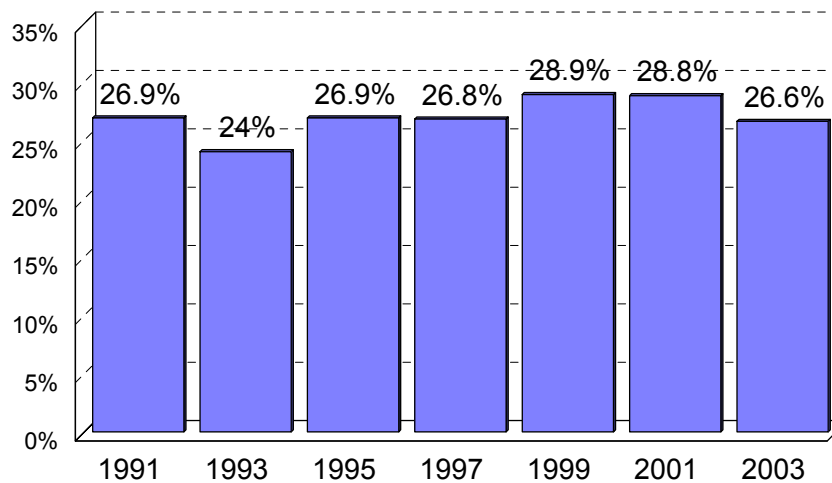


Lincoln-Lancaster County Health Department

\* Grade-adjusted

- L The percentage of teens that have ever had sex who reported alcohol and drug use prior to their last sexual encounter has remained unchanged since 1991.

**Figure 3: Alcohol or Drug Use Prior to Last Sexual Intercourse\***  
High School Students Who Reported Having Had Sex



Lincoln-Lancaster County Health Department

\* Grade-adjusted

Figure 4 reveals that the proportion of teens using a condom at last intercourse increased from 61.4% in 2001 to 72.8% in 2003.

**Figure 4: Condom Use During Last Sexual Intercourse\***

High School Students Who Reported Having Had Sex

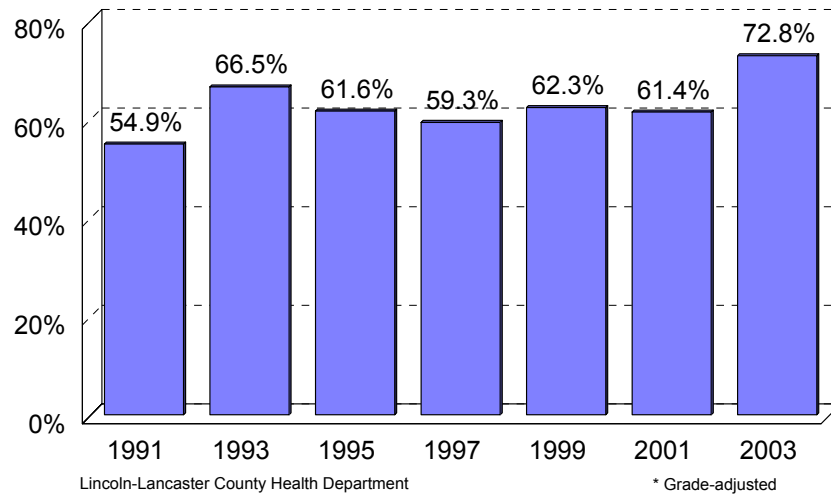
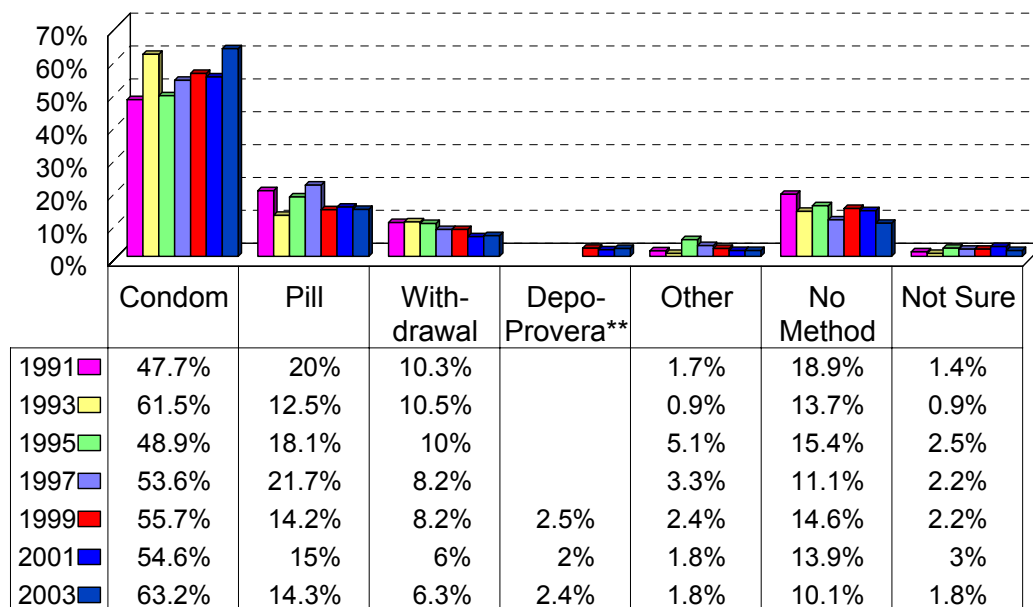


Figure 5 shows different contraceptive methods used by the teens during their last sexual intercourse. Other than the increase in condom use and a drop in “no method”, the use of other contraceptive methods has shown little change.

**Figure 5: Contraception Method Used During Last Sexual Intercourse\***

High School Students Who Reported Having Had Sex



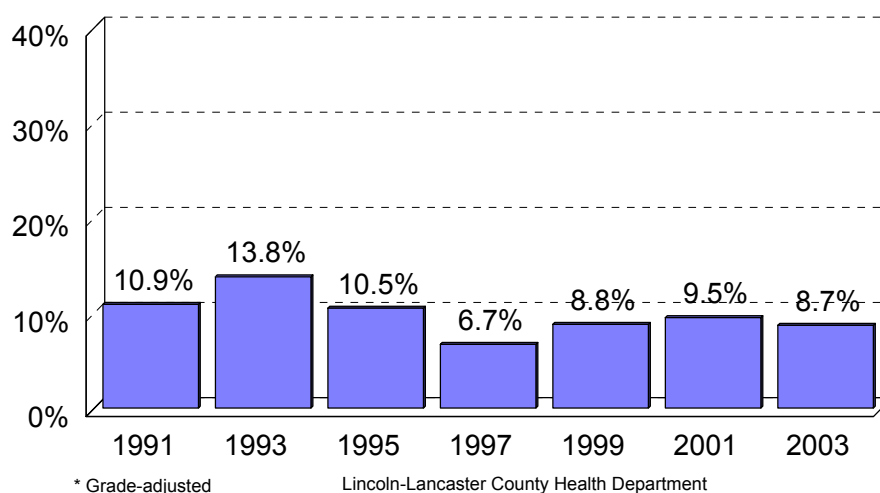
\* Grade-adjusted

\*\* New response option in 1999

Lincoln-Lancaster County Health Department

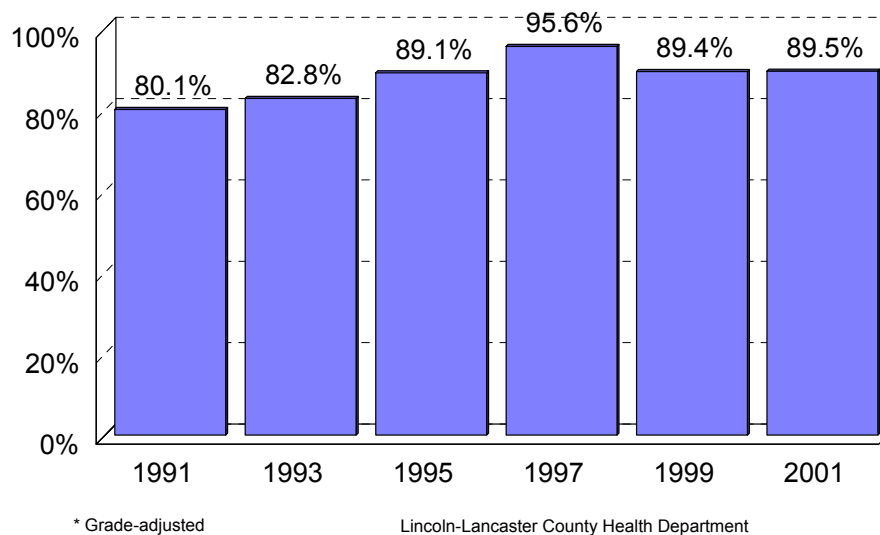
L As shown in figure 6, among teens who reported to have had sex, 8.7 percent reported that they have been pregnant or gotten someone pregnant.

**Figure 6: Have Been Pregnant or Gotten Someone Pregnant\***  
**High School Students Who Reported Having Had Sex**



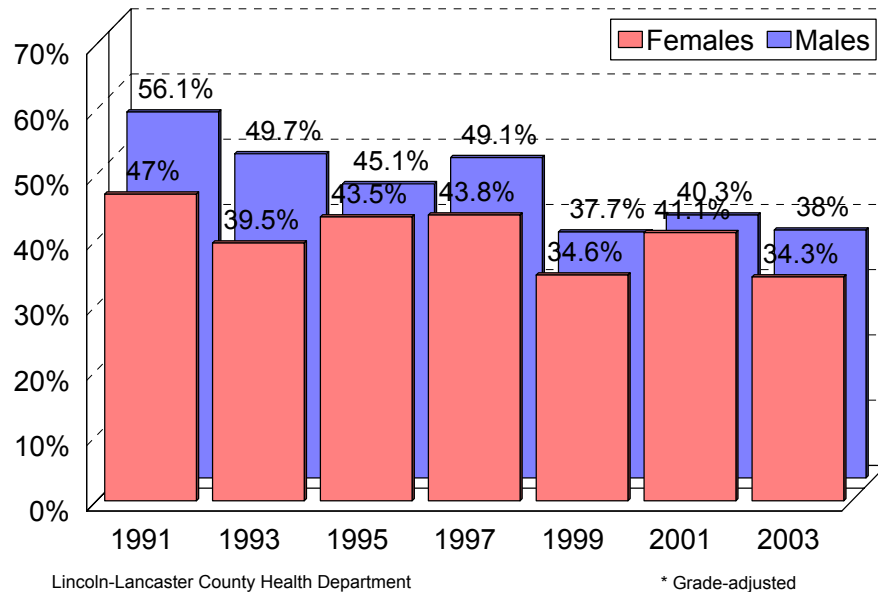
L Figure 7 reveals that the proportion of high school students who had AIDS/HIV education in school has remained stable since 1999 and it's at a level rate with the data from 1995.

**Figure 7: Had AIDS/HIV Education in School**  
**High School Students\***

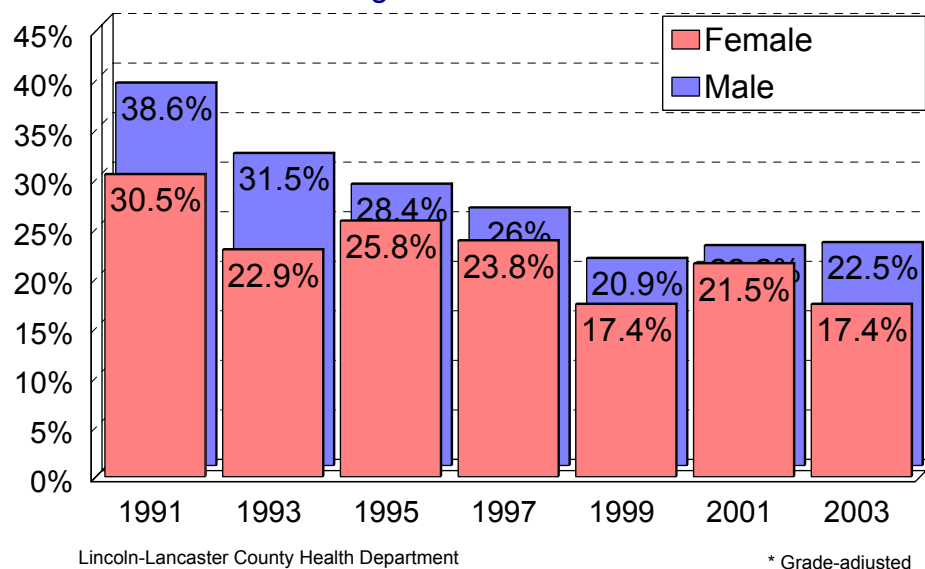


L From 1991 to 2003, reported sexual activity declined for both sexes, and gender differences decreased. Males were slightly more likely to report having had sex, having more sexual partners, using condoms when having sex and indicating alcohol or drug use prior to sex than females in 2003 (Figures 8, 9, 10 & 11).

**Figure 8: Sexual Activity\***  
High School Students Who Have Ever Had Sexual Intercourse

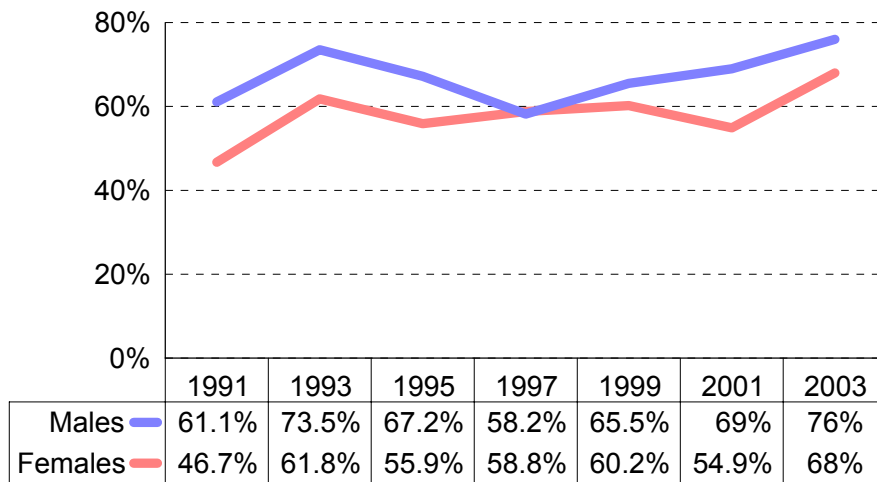


**Figure 9: Have Had More Than One Sex Partner\***  
High School Students



# Figure 10: Used Condom at Last Sexual Intercourse\*

High School Students Who Reported Having Had Sex

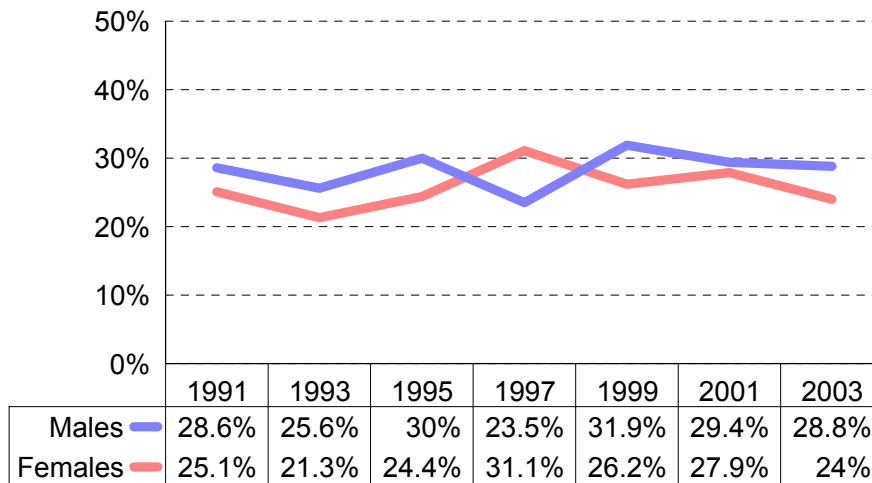


Lincoln-Lancaster County Health Department

\* Grade-adjusted

# Figure 11: Alcohol or Drug Use Prior to Last Sexual Intercourse\*

High School Students Who Reported Having Had Sex

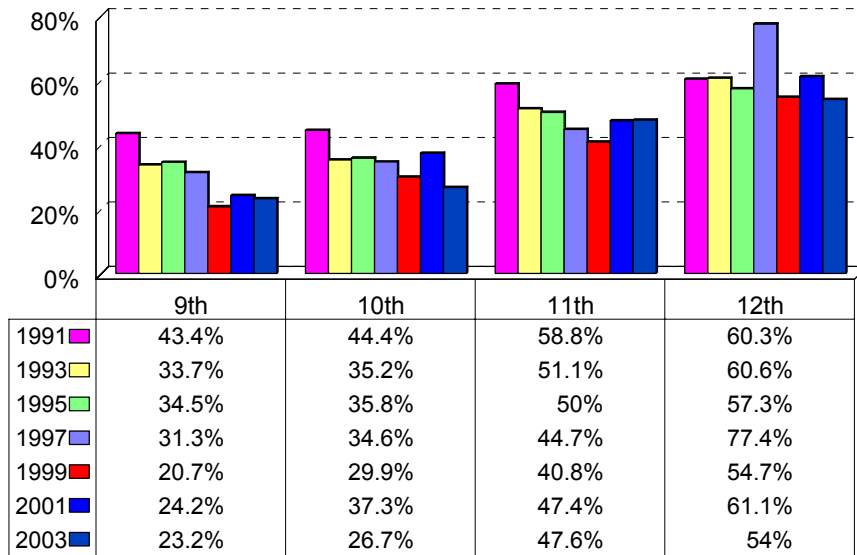


Lincoln-Lancaster County Health Department

\* Grade-adjusted

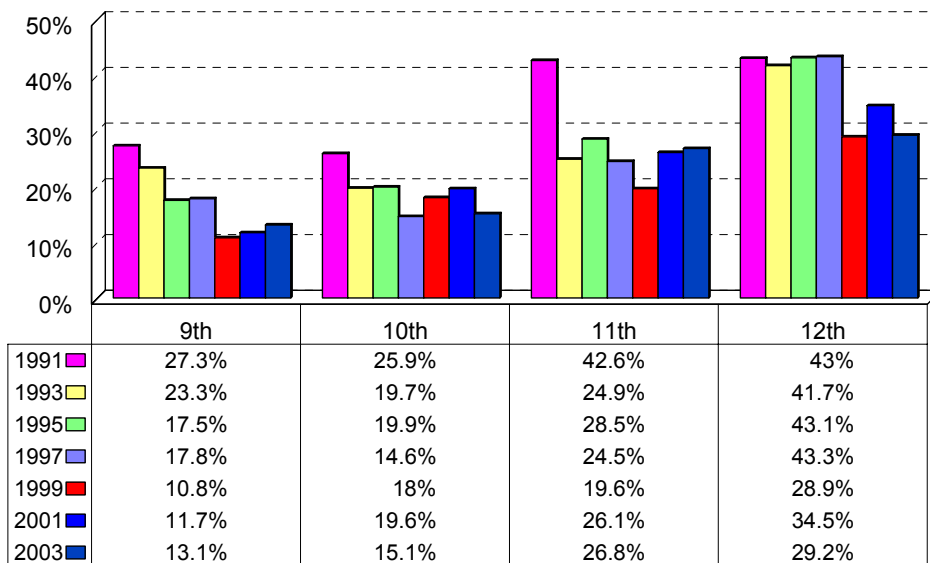
L As expected, Figures 12, 13 and 14 show that teens in older grades were more likely than teens in younger grades to report sexual activity, having more than one partner and having had sex during the past 3 months.

**Figure 12: Sexual Activity By Grade**  
High School Students Who Reported Having Had Sex



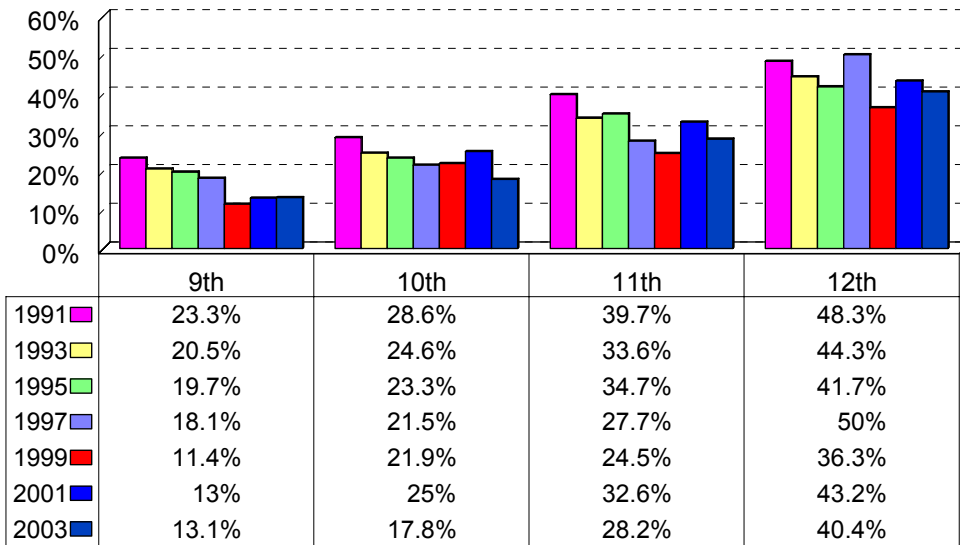
Lincoln-Lancaster County Health Department

**Figure 13: Sexual Activity By Grade**  
High School Students Who Reported Having Had More Than One Sexual Partner During Their Lifetime



Lincoln-Lancaster County Health Department

**Figure 14: Sexual Activity By Grade**  
**High School Students Who Reported Having Had Sex in**  
**the Past 3 Months**



Lincoln-Lancaster County Health Department



## **Public Health Comment: Sexual Activity**

-David Humm

The care and protection of children is, first and foremost, a family concern. But when teenagers have babies, the consequences are felt throughout society. Children born to teenage parents are more likely to be low birth-weight infants and to suffer from inadequate health care. They also are more likely to leave high school without graduating and therefore more likely to be poor, which leads to a cycle of unintended consequences. The potential is great with 45.6% of U.S. high school students in 2001 reporting they have ever had sexual intercourse. In addition, 33.4% reported having had sexual intercourse during the previous 3 months. In Lancaster County trend data have shown a decline as the 36.2% of high school students who reported ever having sex in the 2003 data, down from 51.5% in 1991. Also 24.2% of teens reported having had sex in the previous 3 months in 2003, which is down from 34.8% in 1991. While Lancaster County has seen positive trends in these statistics, teenage sexual activity remains a primary public health concern.

Effectively addressing teenage sexuality within the community continues to be controversial. Personal opinions often become barriers and limit an individual's willingness to seek out factual information from other individuals, advocates and agencies capable of providing education in preventing unplanned pregnancies and sexually transmitted diseases. Responsible adults and family members can convey to children, even at a young age, clear and relevant information about sexuality and appropriate sexual behavior. Such advice can counter the often one-dimensional messages and images about sex that young people hear and see in popular culture, and may result in a willingness by teenagers to postpone sexual involvement.

It must be recognized that there is no magic solution to reducing teen pregnancy, childbearing and STD rates, nor will a single intervention work for all teens. It is essential to continue and expand a range of programs that embrace many strategies. Experts agree that holistic, comprehensive and flexible approaches are needed. The Lincoln Lancaster Teen Pregnancy Prevention Coalition is composed of a broad representation of community agencies working together to find common solutions. In addition, Abstinence Education, Male Responsibility, 40 Developmental Assets, and All Stars are among programs offered for expanding one's ability to communicate safe sexual lifestyle messages to youth.